

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective December 8, 2004

10/8/84 8829

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

|                                  |  |              |                          |
|----------------------------------|--|--------------|--------------------------|
| TOTAL CLAIMS                     |  |              |                          |
| FOR                              |  | NUMBER FILED | NUMBER EXTRA             |
| TOTAL CHARGEABLE CLAIMS          |  | minus 20 =   | *                        |
| INDEPENDENT CLAIMS               |  | minus 3 =    | *                        |
| MULTIPLE DEPENDENT CLAIM PRESENT |  |              | <input type="checkbox"/> |

\* If the difference in column 1 is less than zero, enter "0" in column 2

SMALL ENTITY  
TYPE

OTHER THAN  
SMALL ENTITY  
OR

|           |        |
|-----------|--------|
| RATE      | Fee    |
| BASIC FEE | 150.00 |
| X\$ 25 =  |        |
| X100 =    |        |
| +180 =    |        |
| TOTAL     |        |

|           |        |
|-----------|--------|
| RATE      | Fee    |
| BASIC FEE | 300.00 |
| X\$50 =   |        |
| X200 =    |        |
| +360 =    |        |
| TOTAL     |        |

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

| AMENDMENT A                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------------|---|------------------|
|  | Total                                     | Independent |   |                  |
|  | * 32                                      | Minus       | ** 79                                       | = 3              |
|  | * 6                                       | Minus       | *** 6                                       | = -              |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             | <input type="checkbox"/>                    |                  |

fee pd. in (v))

SMALL ENTITY OR

OTHER THAN  
SMALL ENTITY

|                  |                        |
|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE |
| X\$ 25 =         | 75                     |
| X100 =           |                        |
| +180 =           |                        |
| TOTAL ADDIT. FEE | 75                     |

|                  |                        |
|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE |
| X\$50 =          |                        |
| X200 =           |                        |
| +360 =           |                        |
| TOTAL ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT B                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------------|---|------------------|
|  | Total                                     | Independent |   |                  |
|  | Minus                                     | Minus       | **  | =                |
|  |   |             | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             | <input type="checkbox"/>                    |                  |

|                  |                        |
|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE |
| X\$ 25 =         |                        |
| X100 =           |                        |
| +180 =           |                        |
| TOTAL ADDIT. FEE |                        |

|                  |                        |
|------------------|------------------------|
| RATE             | ADDI-<br>TIONAL<br>FEE |
| X\$50 =          |                        |
| X200 =           |                        |
| +360 =           |                        |
| TOTAL ADDIT. FEE |                        |

(Column 1) (Column 2) (Column 3)

| AMENDMENT C                                    | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |             | HIGHEST<br>NUMBER<br>PREVIOUSLY<br>PAID FOR | PRESENT<br>EXTRA |
|--|---|-------------|---|------------------|
|  | Total                                     | Independent |   |                  |
|  | Minus                                     | Minus       | **  | =                |
|  |   |             | ***   | =                |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |             | <input type="checkbox"/>                    |                  |

|          |                        |
|----------|------------------------|
| RATE     | ADDI-<br>TIONAL<br>FEE |
| X\$ 25 = |                        |
| X100 =   |                        |
| +180 =   |                        |

|         |                        |
|---------|------------------------|
| RATE    | ADDI-<br>TIONAL<br>FEE |
| X\$50 = |                        |
| X200 =  |                        |
| +360 =  |                        |